State of New Jersey Department of Law & Public Safety

Department of Law & Public Safety Division of Highway Traffic Safety P.O. Box 048 Trenton, NJ 08625-0048

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Drunk Driving Enforcement Fund Application N.J.S.A. 39:4-50.8 /N.J.A.C. 13:86

| Law Enforcement Agency and Address: | Funding currently availa | Funding currently available: | |
|---|---------------------------|-------------------------------|--|
| | 2007 Surcharge Funds: | \$ | |
| | 2007 Bottle Tax Funds: | \$ included w/surcharge funds | |
| | Prior Unclaimed Funds: | \$ | |
| County: | Total Funds Available: | \$ | |
| Proposed Drunk Driving E | Inforcement Fund Ex | penditures | |
| PRIMARY - MANDATORY: (a minimum of 50 percent of total available funds, 1. Officer overtime salaries for DWI patrols OPTIONAL: (DHTS approval not required) | | \$ | |
| | of law enforcement office | | |
| Salaries for overtime court appearances of law enforcement office required in connection with prosecution of violation of 39:4-50: | | \$ | |
| Audio visual equipment and supplies used to document and preserve evidence of Enforcement of 39:4-50: | | \$ | |
| Breath testing instruments and supplies approved by the Attorney General pursuant to N.J.A.C. 13:51-3.1: | | \$ | |
| 5. Blood Test Kits: | | \$ | |
| Safety equipment needed to conduct DV Enforcement of 39:4-50 (cones, flares, li | | \$ | |
| OTHER EXPENDITURE: (DHTS approval required) | | | |
| 7. Request to expend funds for time or equest funds expended must enhance the enformation must be attached. Approval of | prcement of 39:4-50. | \$ | |
| To | tal DDFF Proposal (1-7) | \$ | |

Anticipated Supplemental Budget Information

| 1. Overtime Salaries | | | | |
|---|---|--|--|--|
| Potential Enforcement Activities (check all that may apply) | | | | |
| DWI Patrols Court | Time | | | |
| If patrols are utilized: | | | | |
| How many officers will work a deta | il? | | | |
| Maximum hourly salary? | | | | |
| Total number of hours per detail? | | | | |
| 2. Audio Visual Equipment | | | | |
| Make | Model | | | |
| Number of UnitsPrice | /Unit \$ Tapes \$ | | | |
| Other | _ Cost \$ Total \$ | | | |
| 3. Alcotest Unit & Supplies (Breathalyzer) | | | | |
| Make | Cost/Unit \$ | | | |
| Repair Costs——Sup | oplies ———————————————————————————————————— | | | |
| 4. Blood Testing Kits | | | | |
| Cost/Kit \$Times_ | Kits = Total \$ | | | |
| 5. Checkpoint Safety Equipment | | | | |
| Flares \$ Cones \$ | Signs \$ Lights \$ | | | |
| Reflectorized Clothing \$ | Other \$ | | | |
| | Total \$ | | | |
| 6. Justification For Time Or Equipment Oth | ner Than That Above. | | | |
| | Total \$ | | | |

| Governmental Agenc | cy Type: | l Municipal | | | |
|--|--|---|--|--|--|
| accurate to the best account dedicated ex ies received in accord | of their knowledge and that this agenc cclusively to its DDEF program as requir dance with the rules set forth at N.J.A.C. | all information submitted here is true and y will deposit all grant monies in a separate ed by N.J.A.C. 13:86-5.6(c), expend all mon. 13:85-2.3, and comply with all other rules in ward pursuant to N.J.A.C. 13:86-2.6(b). | | | |
| s the Expenditures of previous SFYGrant Monies Report completed? | | | | | |
| 1. Project Direct | etor: | | | | |
| Name: | Title: | | | | |
| Address: | | | | | |
| Phone: ()_ | Phone: () Signature: | | | | |
| 2. Financial Dir | ector: | | | | |
| Name: | | Title: | | | |
| Address: | | | | | |
| Phone: ()_ | Signatu | re: | | | |
| 3. Authorizing | Official: | | | | |
| Name: | | Title: | | | |
| Address: | | | | | |
| Phone: ()_ | Signatu | re: | | | |
| 4. Between 7/1/00 | 6 and 6/30/07, our agency received | \$ | | | |
| | and expended (from page 4) | \$ | | | |
| 5. Approval | | This Grant Amount \$ | | | |
| Pa | ul F. Groffie / DDEF Coordinator | Date | | | |
| | DHTS Director | | | | |
| | 2 5 5 11 5 5 15 1 | 540 | | | |

Expenditure of Previous SFY Grant Monies ReportJuly 1, 2006 Through June 30, 2007

| Project Director's Name: | | Phone () | | |
|---|----------------------|----------|--|--|
| Number of Drunk Driving convictions during reporting period: | | | | |
| Number of Drunk Driving summonses written for | or this period: | | | |
| 1. Primary - Mandatory 50% overtime patrol or checkpoint salary detail. | | | | |
| a. Total overtime man hours of Patrol activity: | | | | |
| b. Total number of checkpoints held: | | | | |
| c. Total overtime man hours of checkpoir | nt activity: | | | |
| d. Total overtime salaries paid | | \$ | | |
| 2. Optional Primary | | | | |
| a. Overtime court salaries for DWI/DRE officer testimony Hours worked @ \$ per hour = | | \$ | | |
| b. Audio Visual equipment and accessory costs | | \$ | | |
| c. Alcotest Unit purchases and supplies or repairs (Breathalyer) | | \$ | | |
| d. Blood Testing Kits and accessories | | \$ | | |
| e. Checkpoint equipment | | \$ | | |
| ТО | TAL Optional Primary | \$ | | |
| 3. Other Funding (Previous Approval Required) Describe the goal of the task and how it was met. (ex: Education Programs at Schools or Civic Groups, Seminars or Training, etc. If additional space is needed please attach separate sheets) | | | | |
| | Total Salaries: | \$ | | |
| | Total Purchases: | \$ | | |
| | Total Other Funding: | \$ | | |
| DDEF Program Expenditures \$ | | | | |
| Supporting documentation not previously submitted is required under N.J.A.C. 13:86-2.5(b) from an entity receiving a grant from the DDE Fund. This documentation should prove overtime salaries were paid to a law enforcement officer working DWI patrols or checkpoints, or required court time for enforcing or convicting for 39:4-50. Purchase documents for authorized equipment, other items or activities must also be included. Acceptable documentation is outlined in the DDEF Summary. The undersigned certify that the information contained on this form is true and accurate to the best of our knowledge. | | | | |

Financial Director

lv-7.07

Date